



PTO/SB/92 (08-03)
Approved for use through 07/31/2006. OMB 0561-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

October 6, 2004

Da	ate
Γransmittal (1p), P	ower of Attorney (4pp), Return Postcard.
	•
	Heathers Port
	Signature
	Heather J. Roth

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Typed or printed name of person signing Certificate

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OF 1 2 2004

				PTO/SB/21 (02-04)
Under the Paperwork Reduction Act o	f 1995, no persons	U.S. Paten s are required to respond to a collection	t and Trademark Offic	use through 07/31/2006. OMB 0651-0031 e; U.S. DEPARTMENT OF COMMERCE s it displays a valid OMB control number.
		Application Number	10/790,468	
TRANSMITTAL	ı	Filing Date	1 March 2004	
FORM		First Named Inventor	König	
(to be used for all correspondence after	initial filing)	Art Unit	2612	
		Examiner Name	JoAnn Steward	
Total Number of Pages in This Submission 6		Attorney Docket Number	HMM-102	
	ENCI	LOSURES (Check all that	t apply)	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts/ Incomplete Application	st Remar	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Ferminal Disclaimer Request for Refund CD, Number of CD(s)	to 1 App of A App (Ap (Ap Pro Sta Oth Ide	er Allowance communication Fechnology Center (TC) peal Communication to Board Appeals and Interferences peal Communication to TC peal Notice, Brief, Reply Brief) prietary Information attus Letter ner Enclosure(s) (please ntify below): r cited references.
SIC	GNATURE C	F APPLICANT, ATTORN	EY, OR AGENT	
Firm or Individual name Technology Patents Charles A. Eldering.		Inc.		
Date October 6, 2004	·UU	×ck.	-	
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.				
Typed or printed name Heather J.	. Roth			
Signature	Theath	nd Rolt		Date October 6, 2004

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	10/790,468
Filing Date	1 March 2004
First Named Inventor	Richard König
Title	Video Detection and Insertion
Art Unit	2612
Examiner Name	Unknown
Attorney Docket Number	HMM-102

I hereby appoint:			
Practitioners associated with the Customer Number:	27833		
OR			
Practitioner(s) named below:			
	Posietration Number		
Name	Registration Number		
as my/our attorney(s) or agent(s) to prosecute the application	identified above, and to transact all business in the United States Patent and		
Trademark Office connected therewith.			
Please recognize or change the correspondence address for	the above-identified application to:		
The address associated with the above-mentioned C	Customer Number		
The address associated with the above-mentioned C	Customer Number.		
OR			
The address associated with Customer Number:			
OR			
Firm or Individual Name			
Address			
Address			
City	State Zip		
Country			
Telephone	Fax		
I am the: Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Name Richard König / / /			
Signature Kan (6			
Date 28/6/2004	Telephone 44-0771-2530033		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple			
forms if more than one signature is required, see below*.	The state of the s		
*Total of _4 forms are submitted.			

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE nder the Paperwork Reduction Act of 1995, no persons are requ

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of info	rmation unless it displays a valid OMB control number.
Application Number	10/790,468
Filing Date	1 March 2004
First Named Inventor	Richard König
Title	Video Detection and Insertion
Art Unit	2612
Examiner Name	Unknown
Attorney Docket Number	HMM-102

I hereby appoint:			
Practitioners associated with the Customer Number:	27833		
OR			
Practitioner(s) named below:			
Name		Registration Number	
	1		
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact	all business in the United States Patent and	
Please recognize or change the correspondence address for	the above-identified application to	o:	
The address associated with the above-mentioned			
	Odstomer Humber.		
OR			
The address associated with Customer Number:			
OR			
Firm or Individual Name			
Address			
Address	L Ctata	[7in]	
City Country	State	Zip	
Telephone	Fax	-	
l am the: Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CF Statement under 37 CFR 3.73(b) is enclosed. (Form			
SIGNATURE o	f Applicant or Assignee of Reco	ord	
Name Charles A. Eldering			
Signature Cle G Clay			
Date Sept 03, 2004	1	Telephone (215) 766-2100	
NOTE: Signatures of all the inventors or assignees of record of the enforms if more than one signature is required, see below*.	tire interest or their representative(s) a	are required. Submit multiple	
*Total of 4 forms are submitted.			

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a velid OMB control surebook.

nder the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	10/790,468
Filing Date	1 March 2004
First Named Inventor	Richard König
Title	Video Detection and Insertion
Art Unit	2612
Examiner Name	Unknown
Attorney Docket Number	HMM-102

I hereby appoint:			
Practitioners associated with the Customer Number:	27833		
OR			
Practitioner(s) named below:			
Name	Registration Number		
as my/our attorney(s) or agent(s) to prosecute the application identified Trademark Office connected therewith.	above, and to transact all business in the United States Patent and		
Please recognize or change the correspondence address for the above	e-identified application to:		
The address associated with the above-mentioned Customer			
OR			
The address associated with Customer Number:			
OR			
Firm or Individual Name			
Address			
Address	State Zip		
Country			
Telephone	Fax		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
	nt or Assignee of Record		
Name Rainer W. Lienhart			
Signature 12. Lun Carl	Telephone (408) 243-5113		
Date 06/26/12009	(10-7-11		
NOTE: Signatures of all the inventors or assignees of record of the entire interestorms if more than one signature is required, see below*.	t or their representative(s) are required. Submit multiple		
*Total of 4 forms are submitted.			

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

nder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

PATENT &

Application Number	10/790,468	
Filing Date	1 March 2004	
First Named Inventor	Richard König	
Title	Video Detection and Insertion	
Art Unit	2612	
Examiner Name	Unknown	
Attorney Docket Number	HMM-102	

I hereby appoint:			
Practitioners associated with the Customer Number:	27833	:	
OR			
Practitioner(s) named below:		<i>,</i>	
Name	Reg	gistration Number	
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact all	business in the United States Patent and	
Please recognize or change the correspondence address for the			
The address associated with the above-mentioned C	Customer Number:		
OR			
The address associated with Customer Number:			
OR			
Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		
lam the:			
Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFF Statement under 37 CFR 3.73(b) is enclosed. (Form			
SIGNATURE of	Applicant or Assignee of Record		
Name Christine Lienhart			
Signature (U. Genhal)			
Date 6/26 12004	Tele	phone (408) 243-5113	
NOTE: Signatures of all the inventors or assignees of record of the ent forms if more than one signature is required, see below*.	tire interest or their representative(s) are i	equired. Submit multiple	
*Total of 4 forms are submitted.			